SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	6	75 OF	1	281		
	(check only one)										
	X	11a		11b		11c		12			
		13		14		15		16		17	

COMMITTEE				
Full Name (Last, First, Middle Initial) Mr. Tommy Morrison Mailing Address 6022 Chapel Falls Lane				
State Zip Code	01 21 2015 Transaction ID : 2015M02L11Al01685			
C	Amount of Each Receipt this Period 250.00			
Occupation WELLS OPERATION MANAGER Aggregate Year-to-Date ▼ 250.00				
	Date of Receipt			
State Zip Code NJ 08750-3231	01 21 2015 Transaction ID : 2015M02L11Al01686 Amount of Each Receipt this Period 275.00			
Occupation RETIRED Aggregate Year-to-Date ▼ 580.00				
State Zin Code	Date of Receipt 01 21 2015			
SC 29928-4936	Transaction ID : 2015M02L11AI01687 Amount of Each Receipt this Period 400.00			
Occupation RETIRED Aggregate Year-to-Date ▼				
	State Zip Code TX 77441-1142 C Occupation WELLS OPERATION MANAGER Aggregate Year-to-Date ▼ 250.00 State Zip Code NJ 08750-3231 C Occupation RETIRED Aggregate Year-to-Date ▼ 580.00 State Zip Code C Occupation RETIRED Aggregate Year-to-Date ▼ C Occupation RETIRED			